



Attorney Docket No.03638/1
Pfizer Docket No. 031420/USA
HDP Docket No. 6794-000176/US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Karen Siebert
Patent No: N/A
Application No: 10/772,760
Filed: 02/04/2004
Title: Treatment and prevention of otic disorders with Cox-2 inhibitors alone or
in combination with otic agents
Group Art Unit: 1614
Confirmation No: 5706
Examiner: Unknown
Attorney Ref: 03638/1
Pfizer Ref: 031420/USA
HDP Ref: 6794-000176/US

**REVOCATION OF POWER OF ATTORNEY,
SUBSTITUTE POWER OF ATTORNEY AND
CHANGE OF CORRESPONDENCE ADDRESS**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

The Assignee of the above-identified patent application or issued patent, Pharmacia Corporation, having a business office at 700 Chesterfield Parkway West, Global Patent Department, Chesterfield, Missouri 63017-1732, hereby revokes any and all previous powers of attorney for the above-identified patent application or issued patent, and hereby appoints the attorneys and patent agents associated with Customer Number 47376 with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith with full power of substitution and revocation, to prosecute this application and any provisionals, continuations, continuations-in-part, divisionals, appeals, reissues, substitutions and extensions thereof and to transact all business in the Patent and Trademark Office connected therewith.

EV 317349266 US

Revocation of Power of Attorney
Substitute Power of Attorney and
Change of Correspondence Address



Attorney Docket No. 03638/1
Pfizer Docket No. 031420/USA
HDP Docket No. 6794-000176/US

All correspondence and telephone calls concerning the above-referenced application should be directed to the Applicant's attorney at the following address:

James E. Davis, PTO Reg. No. 47,516
Harness, Dickey & Pierce, P.L.C.
7700 Bonhomme, Suite 400
Clayton, Missouri 63105
(314) 726-7500 (general tel)
(314) 446-7683 (direct tel)
(314) 726-7501 (fax)

The undersigned (whose title is supplied below) is empowered to sign this Revocation and Substitute Power of Attorney on behalf of the Assignee.

I hereby declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Respectfully submitted,

Signature

12/8/04

Date

Grover F. Fuller, Jr.

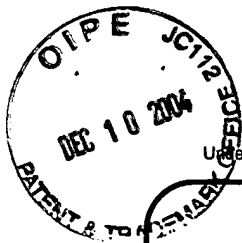
Typed or printed name

Assistant Secretary

Title

Certificate of Mailing Under 37 C.F.R. 1.8

I hereby certify that this is being deposited in the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on December 10, 2004.



PTO/SB/122 (09-03)

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Address to:
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P.O. Box 1450
Alexandria, VA 22313-1450.

Application Number	10/772,760
Filing Date	02/04/2004
First Named Inventor	Karen Siebert
Art Unit	1614
Examiner Name	Unknown
Attorney Docket Number	03638/1; 031420/USA; 6794- 000176/US

Please change the Correspondence Address for the above-identified application to:



Customer Number:

47376

OR

Firm or
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I am the :

☐ Applicant/Inventor.☐ Assignee of record of the entire interest.
Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).☒ Attorney or agent of record. Registration Number 47,516.☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.Typed or
Printed Name

James E. Davis

Signature

Date

12/10/2004

Telephone 314-726-7500

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Karen Seibert

Application No./Patent No.: 10/772,760

Filed/Issue Date: 02/04/2004

Entitled: Treatment and prevention of otic disorders with Cox-2 inhibitors alone or in combination with otic agents

Pharmacia Corporation, a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title, and interest

The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____

To: _____

The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____

To: _____

The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____

To: _____

The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☒ Copies of assignments or other documents in the chain of title are attached.

(NOTE: A separate copy (i.e., a true copy of the original document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Signature

12/8/04

Date

Grover F. Fuller, Jr.

Printed or Typed Name

Telephone Number

Assistant Secretary

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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ASSIGNMENT

WHEREAS, I/WE, the undersigned, have made certain invention or inventions which are disclosed in patent application(s) and/or provisional patent application(s) entitled:

**TREATMENT AND PREVENTION OF OTIC DISORDERS WITH COX-2 INHIBITORS
ALONE OR IN COMBINATION WITH CONVENTIONAL OTIC AGENTS**

the specification of which was filed as a Provisional Application on March 20, 2003, and given Serial Number 60/456,286, and is identified by Nelson Mullins Riley & Scarborough docket number as 18438/09056, and Pharmacia Reference number 03638/1.

WHEREAS, PHARMACIA CORPORATION, having its address at Mail Zone MC5S, 575 Maryville Centre Drive, St. Louis, Missouri, 63141, U.S.A., a business organized under the laws of the State of Delaware, is desirous of acquiring the entire right, title and interest in and to said invention or inventions and any and all patents to be obtained therefor;

NOW, THEREFORE, FOR GOOD AND VALUABLE CONSIDERATION, the receipt of which is hereby acknowledged, I/WE do hereby sell, assign and transfer to said PHARMACIA CORPORATION, its successors and assigns, the entire right, title and interest in and to said invention or inventions, in any form or embodiment thereof, and in and to said application(s); and in and to any and all applications filed in any country based thereon, including the right to file application in countries other than the country of priority filing under the provisions of any international convention; also in and to any and all improvements on said invention or inventions now or hereafter made by me/us as employee(s), agent(s) or contractor(s) of said PHARMACIA CORPORATION, also the entire right, title and interest in and to any and all patents, including reissues and extensions thereof, to be obtained in any country upon said invention, inventions or improvements, and any and all continuing applications, including divisional, continuation and continuation-in-part applications, substitute applications, and applications claiming benefit of an earlier filed provisional application, which may be filed upon said invention, inventions or improvements in any country; and

I/WE hereby authorize and request the issuing authority to issue any and all patents on said application or applications to said PHARMACIA CORPORATION, as assignee of the entire interest.

I/WE further agree, without any payment by PHARMACIA CORPORATION, other than in reimbursement of reasonable expenses I may incur, to communicate to said PHARMACIA CORPORATION, its representatives or agents, any facts relating to said invention, inventions or improvements, including evidence for purposes of interference, opposition or other legal proceedings, whenever requested; testify in any interference, opposition or other legal proceedings, whenever requested; and execute and deliver, on request, all lawful papers required to make any of the foregoing provisions effective.

IN TESTIMONY WHEREOF, I have hereto set my hand on the date set after my signature.

Signature: Karen Seibert

Date: 8/8/03

Name: Karen Seibert

Residence: 147 Marine Lane, St. Louis, MO 63146

State of Missouri

County of St. Louis

On this 8th day of August, 2003, before me personally appeared Karen Seibert, to me known to be the person who executed the foregoing instrument and acknowledged that he executed the same as his free act and deed; in testimony whereof I have hereto set my hand and official seal on the day last above-written.

Joyce H. Krebs
Notary Public

My Commission expires 8-10-06

JOYCE H. KREBS
NOTARY PUBLIC - STATE OF MISSOURI
MY COMMISSION EXPIRES 08/10/2006
ST. LOUIS COUNTY